

Perception of the nursing care quality by patients of an Andean hospital

[Percepción de la calidad de atención de enfermería por pacientes de un hospital andino]

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Resumen

La investigación tuvo como objetivo determinar la calidad de atención de enfermería según la percepción del paciente internado en el Hospital "Víctor Ramos Guardia" Huaraz. La hipótesis fue: Es buena la percepción de la calidad de atención de enfermería de los pacientes internados en el Hospital Víctor Ramos Guardia de Huaraz. El estudio fue descriptivo, correlacional y transversal, la muestra fue de 88 pacientes hospitalizados, se realizó el procesamiento y análisis de acuerdo a la aplicación de un cuestionario de 18 ítems. Los resultados: La calidad de atención de enfermería según la percepción del paciente internado en el Hospital Víctor Ramos Guardia en el periodo 2016 con 55.7% fue buena, el 65.9% el componente técnico, así mismo el 60.2% el componente interpersonal y finalmente el componente confort del entorno 61.4% en la calidad de atención de enfermería como buena. Según las variables sociodemográfica: Se apreció que los pacientes de sexo femenino 37.5%, con grado de instrucción superior 37.5%, el estado civil convivientes 36.4%, de religión católica 44.3% afirmaron que la calidad de atención de enfermería fue buena, mientras que los que residieron en la zona urbana 44.3% reportaron que la calidad de atención de enfermería es mala. En conclusión, la calidad de atención de enfermería fue buena según la percepción del paciente internado en el Hospital Víctor Ramos Guardia.

Palabras clave: Calidad, atención de enfermería, percepción de los pacientes.

Abstract

The objective of the research was to determine the quality of nursing care according to the perception of the patient admitted to the Hospital "Víctor Ramos Guardia" Huaraz. The hypothesis was: The perception of the quality of nursing care of patients admitted to the Víctor Ramos Guardia Hospital in Huaraz is good. The study was descriptive, correlational and cross-sectional, the sample consisted of 88 hospitalized patients, the processing and analysis was carried out according to the application of an 18-item questionnaire. The results: The quality of nursing care according to the perception of the patient admitted to the Víctor Ramos Guardia Hospital in the 2016 period with 55.7% was good, 65.9% the technical component, likewise 60.2% the interpersonal component and finally the component comfort of the environment 61.4% in the quality of nursing care as good. According to the sociodemographic variables: It was observed that female patients 37.5%, with a higher degree of education 37.5%, the marital status cohabitating 36.4%, Catholic religion 44.3% affirmed that the quality of nursing care was good, while those who resided in urban areas 44.3% reported that the quality of nursing care is poor. In conclusion, the quality of nursing care was good according to the perception of the patient admitted to the Víctor Ramos Guardia Hospital.

Keywords: Quality, nursing care, patient perception

1. Introduction

For Koziar (1992) nursing as a discipline emerged in 1860 with Florence Nightingale, who with a group of nurses provided care with care and dedication to the soldiers of the Crimean War, resulting in the improvement of many of them, few being who died, which made society notice the image and importance of the work of the nurse. Over the years, new models of care or care have emerged to practice the profession, but all of them speak of the nurse-patient relationship and the care that should be provided, always seeking quality, technical, scientific and humanistic care.

Likewise, the studies that evaluate the quality of nursing care seek not only to improve the good, but also seek excellence in order to identify negative factors and critical areas, formulating strategies aimed at reducing these factors until they are definitively eliminated. For Donabedian (1990), with the globalization that exists in the current world and the constant changes that have originated, health professionals have the mission of providing health care to the population; demanding from the nursing professional a quality care based on a solid base of knowledge and skills, through the application of judgments and correct reasoning in a system of clear and convenient values, demonstrating responsibility in the performance of their functions since the patient has the right to receive the best quality of care.

Physicians and other persons or organizations that provide medical care have a joint responsibility to recognize and respect the rights of the patient according to the Lisbon Declaration of the World Medical Assembly (2015). When the legislation, a government measure, or any other administration or institution denies these rights to the patient, health personnel must seek the appropriate means following the principles: Right to good quality medical care. Everyone has the right, without discrimination, to appropriate medical care. Every patient has the right to be cared for by a doctor who he knows is free to give a clinical and ethical opinion, without any outside interference. The patient should always be treated with respect for his best interests. The treatment applied must be in accordance with generally approved medical principles. Quality assurance must always be a part of medical care, and physicians, in particular, must accept the responsibility of being the guardians of the quality of medical services. In circumstances when a choice must be made between potential patients for a particular treatment, which is limited, all such patients are entitled to a fair selection for that treatment. This choice must be based on medical criteria and must be made without discrimination. The patient has the right to continuous medical care.

As a derivation of universal health rights, the patient has the right to: receive adequate medical care, with dignified and respectful treatment, the patient has the right that the doctor, nurse and personnel who provide health care, be identify and grant you a dignified treatment, with respect to your personal and moral convictions, mainly those related to your sociocultural conditions, gender, modesty and your privacy, whatever the suffering that presents, and is extended to the relatives or companions. Receive sufficient, clear, timely and truthful information and decide freely about your care.

Under these and other conditions generated by the state through the Hospital Víctor Ramos Guardia de Huaraz, it offers its services with great dedication according to how it presents its internal organization, the constitution of its staff of health professionals, technical and administrative staff; as well as the physical conditions of its equipment and infrastructure. The objective of the study was to describe the quality of nursing care according to the perception of the patient admitted to the Víctor Ramos Guardia Hospital in Huaraz city.

2. Materials and methods

A descriptive cross-sectional study was designed, with a study population made up of 1,100 hospitalized patients in the General Medicine Department of the Víctor Ramos Guardia Hospital. The Inclusion Criteria were: Patients who wish to collaborate with the study, with preserved sensorium, adults and older adults, hospitalized for more than 24 hours, hospitalized within the study period. The Exclusion Criteria were: Patients with mental disorders, who do not wish to collaborate with the study and who are not hospitalized within the study period. The sample was made up of 88 patients with a confidence of 95%.

The instrument was the 18-item questionnaire, whose validity was evaluated by expert judgment and to verify the reliability of the instrument, the pilot test was carried out. The instrument was divided into 2 parts: The first, which contained data on the sociodemographic characteristics of the patient, which contained items such as age, sex, level of education, marital status, area of residence, and single-response religion. The second, data on the perception of patients that consists of 18 items, likert scale responses, of which 6 questions correspond to the quality of nursing care, 6 to the interpersonal component and 6 items correspond to the comfort component and the environment. To rate the quality of nursing care according to the perception of the patient, a rating of 1 to 2 was given as bad and from 3 to 4 as good.

The information collected through the questionnaires was entered into a computer with the help of the SPSS version 24 Program in the form of a score in a Subject x Item Matrix. Rating scores were 4,3, 2, and 1 for the Agree, Unfavorable, and Favorable scales respectively.

The data were processed in SPSS version 24.0 and analyzed with descriptive and inferential statistical methods at 95% confidence.

The present investigation did not have any bioethical implication and administrative consents were requested from the entities where the investigation was carried out.

3. Results

The variable quality of nursing care according to the perception of the hospitalized patient is presented in Table 1, where it is observed that 55.7% of the total of respondents affirm that the quality of nursing care is good and the remaining 44.3% of those interviewed affirm what is bad. 65.9% of the total respondents state that the technical component is good, likewise 60.2% of the interviewees affirm that the interpersonal component is good and finally the comfort component of the environment is good in the quality of nursing care for 61.4% of the total of interviewees. 55.4% of users had a moderately favorable overall perception of the user's nursing care (Orocollo, 2017) and the majority of patients from medicine and surgery services they perceive the quality of nursing care as moderately favorable (Bustamante, 2015; Borre and Vega, 2014, Silva et al., 2012).

Table 1: Quality of nursing care according to the perception of the hospitalized patient, in the Víctor Ramos Guardia hospital in the period

Variable and Dimension	Category	n	%
Quality of Nursing Care, HVRG	Bueno	49	55.7
	Malo	39	44.3
Technical component	Bueno	58	65.9
	Malo	30	34.1
Interpersonal component	Bueno	53	60.2
	Malo	35	39.8
Environment comfort component	Bueno	54	61.4
	Malo	34	38.6

It is observed that 44.3% of the total respondents affirm that the quality of nursing care is good and that they are Catholic. Graciano (2010) refers that religion has an important influence on human life, it also plays a crucial role in structuring the lives of many people. Spiritual and religious beliefs are great aids when it comes to coping positively with serious illnesses, and they often remain the only reference when no biomedical treatment is already effective in terminal illnesses. 19.3% of respondents affirm that the quality of nursing care is good and they are under 25 years of age, while 44.3% of respondents rate the quality of nursing care as poor and are patients older than 50 years; we found a significant association. It is observed that the female patient affirms that the quality of nursing care is good in 37.5%, while the male patients perceive the quality of nursing care as bad in 33%, being significant and agreeing with Bustamante (2015) who reported that 33.3% were female patients who reported the perception of hospitalized patients on the quality of nursing care was favorable.

It can be observed in Table 2, that patients with a higher level of education have a good perception of the quality of nursing care with 37.5%, followed by patients with a secondary level of education who perceive the quality of care as good in 18.2%, and patients with a degree of education without studies and primary school have a bad perception with 12.5%, we found an association with a confidence level of 95%. Disagreeing with Sánchez (2015) that most of the patients had a secondary education level with a good perception level regarding the quality of care provided by the Nursing professional.

We present the variable quality of nursing care according to the perception of the hospitalized patient according to the marital status of the patient, in which it is observed that 36.4% of the total of respondents affirm that the quality of nursing care is good and they are cohabiting, while that 19.3% of the total interviewees rate the quality of the nurse's care as good and are single; Married marital status patients have a poor perception of the quality of nursing care by 10.2%. In agreement with Bustamante (2015), I conclude that 33.3% were patients with married marital status who report the perception of the hospitalized patient on the quality of nursing care was favorable.

Table 2: Quality of nursing care according to the degree of education of the hospitalized patient
Hospital Víctor Ramos Guardia

Instruction grade	Category	n	%
Without studies	Good	0	0
	Bad	11	12.5
Primary	Good	0	0
	Bad	11	12.5
High School	Good	16	18.2
	Bad	0	0
Higher	Good	33	37.5
	Bad	17	19.3
Total	Good	49	55.7
	Bad	39	44.3
Statistical	X ²	42.533	
	LG	3	
	P-value	0.02	

The perception of hospitalized patients according to area of residence, in Table 3, it is observed that 44.3% of the total of respondents affirm that the quality of nursing care is poor and they reside in urban areas, compared to 37.5% of the total of patients interviewed who rate the quality of care

as good and reside in an urban area. In addition, performing the non-parametric chi-square statistical test of dependence, we found an association between the quality of nursing care and the area of residence of the patient at 95% confidence. It is observed that the patient who lives in an urban area is more demanding in terms of the quality of care than the patient who lives in a rural area.

Table 3: Quality of nursing care according to place of residence of the hospitalized patient Víctor Ramos Guardia Hospital, 2016

Area of residence	Category	n	%
Urban	Good	33	37.5
	Bad	39	44.3
Rural	Good	16	18.2
	Bad	0	0
Total	Good	49	55.7
	Bad	39	44.3
Statistical	X ²	15.565	
	LG	1	
	P-value	0.04	

4. Conclusions

- The nursing care quality was good according to the perception of the hospitalized patient.
- The three components of quality were good in the technical component, the interpersonal component and the comfort component according to the perception of the hospitalized patient.
- The nursing care quality according to the perception of the hospitalized patient according to the sociodemographic variables: It was observed that female patients, with a higher degree of education, the marital status cohabiting, of the Catholic religion affirms that the quality of nursing care was good, while those who resided in the urban area reported that the quality of nursing care is poor.

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Annexed

INSTRUCTION: We kindly ask you to answer honestly what is indicated below.

I. GENERAL INFORMATION

1. Age:
2. Sex: Male () Female ()
3. Degree of Instruction: No instruction () Primary () Secondary () Higher Technical ()
University Superior ()
4. Marital Status: Single () Married () Divorced () Widowed ()
5. Religion: Catholic () Evangelical () Others ()
6. Place of residence Urban () Rural ()

II. SPECIFIC DATES:

Nursing care quality	1	2	3	4
7. Technical component				
8. Professional competence of the nurse				
9. Efficiency in the supply of medicines				
10. Continuity in the execution of the service				
11. Accessibility of treatment with the nurse				
12. Security in the execution of operations				
Interpersonal component				
13. Timely circulation of information				
14. Clarity of the information provided				
15. Demonstration of trust and respect in the treatment				
16. Cordial relationship between nurse and patient				
17. Practice of empathy in prescribed treatment				
18. Practice of truthfulness in the information				
Environment comfort component				
19. Ventilation and lighting of environments				
20. Properly prepared food supply				
21. Maintaining the cleanliness of the environments				
22. Care for the privacy of the environments				
23. Orderly presentation of the goods to be used				
24. Offer of amenities according to treatment				

Questionnaire Criteria Legend.

The quality of nursing care

1 and 2: Bad. 3 and 4: Good